File with: iows Ethics and Campaign Disclosure Board 510 E. 12th, Sts. 1A Des Moines, Iows 50319 Fax: 515-281-4073



COMMITTEE NAME (Must be some as on Statement of Organization)

IA ETHICS AND CAMPAISM MISCLOSURE PO

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

2009 JAN 15 PM 4: 03

FORM
DR-2
(Rev. 07/2007) DISCLOBURE
REPORT

Black & For State IMPORTANT: Indicate by # type of committee you are reporting for: [1] Statewide/Legislative/Judgo Standing for Retention Candidate (2)8 [4] County Central Committee (5) County Candidate (6) City Candidat Subdivision Candidate (8) County PAC (9) City PAC (10) School Bot 11) Local Bellot leeus	State PAC (3)State Perty te (7)School Board or Other Political	FORM DR-2 (Rev. 07/2007) For Office Use On	DISCLOSUI REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name Conn Beas Office Sought Lowa State House	Political Party (If applicable) Democratic District (If Senete of House)	Scenned Computer	
ate reports are subject to possible civil and oriminal penalties. Pursu	uant to lows Code eactions 688.32A(7) an		_

Source Sperson Filing REPORT 563-382-62 TELEPHONE	222 1-15-09 DATE SIGNED
AM FILING A SOME (report date) 2009 REPORT FOR (1) ELECTIC	ON /(2)NON-ELECTION YEAR. by # 2
CHECK IF AMENDMENT TO REPORT DATED	Local Committees, enter Date of Election
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)	County & Local Committees, enter County in which Steetion is held

STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below) Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)............... Schedule F: Loan Repayments total (Attach Schedule F)..... **UNPAID BILL\$ (From Schedule D - Attach Schedule D)......\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?) YES ____NO CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For instructions, See Back of Form	A COLUMN	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NDING FORM
Beard SOR STATE House	_		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 689.32A(6), prohibite the use of information copied from reports and statements for soliditing contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
1908	CK#	Parrick Stans Verry 705 W. Church ST V Marshall town Af 5058		15.37	س
19/0/8	CK# 18654	IBEW EDUCATIONAL COMM 900 Seventh St. NW Washington DC 20001		200.00	
1/3/08	CK# 205000 [87]	205 Ohio St Decorah DA 52101		48.02	<u>''</u>
16/08	CK#	1203 SKY INC DR Decoral 84 52101		50.00	
168	CK#	Janelle Paulovea Box 124 Calmar, JA 52132		100.00	
16/08	ID# 8228 CK# OO 17873	CWA - COAE ACC 501 3RD ST. NW Washington DC 20001		100.00	[J
1/4/08	ID# 8005 CK# OD 6575	DRIVE Committee 25 Sourseaner AVENW Washington, DC 20001		500.°	
13/8/08	CK# 3829	BUILD Sowa Bankers Association 8800 NW 62ND FUE Johnston IA 50131		1,000.00	V
13/08	CK# 893	Council PAC Council PAC 110 10th Ave.NW ALTOONA, DA 50009		125.00	~
130/08	CK# 892	Well faci 636 grand Ave. #13 Des Moines, DA 50309		250.00	
			SUB-TOTAL	238839	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, anter "not applicable" in the relationship column.

Page 2 to of (for Schedule A)

TOTAL (If last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Beard for State House

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: 4 A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBLITES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
30/8	CK# 3789	Des Moines, DA 50309		\$ 100,00	V
13/30/8	ID# 6429 CK# 2223	Heavy Highway PAC 2415 Ingeroolts ave. Des Moines DA 50312		250.00	
13/08	1D# 6042 CK# 1448	2540 1064h St = 102		254"	V
13/08	1D# 6021	Credit Union PAC POBOD 10409 Des Maines DA 50306		1,000.	V
13/08	10# 6067 ck#3992	Joura Health PAC 150 Westown Pkwy 1000 W. Des Maines 9A 50266		100.00	V
13/08	ID# 9672 CK#/322	Plumbers & Pipelitters = 125 1839 1674 ADE SW Ceder Reguls DA 52404		2,0000	V
.	ID#				
	ID# CK#	***			
	ID#				
	ID#				
			SUB-TOTAL	- 37M 10	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 27 of 27 (for Schedule A) 2 of 2

TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B	MONETARY EXPENDITURES
(Rev. 07/03)	EAPENDITCHES
CHE	CK THIS BOX IF

AMENDING FORM

COMMITTEE	NAME (Must be a	ame as on Statement of Organization)		
TE	eard <	Son State		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Diabursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
19/08	CK# 10 63	Shuman Fund Des Proines DA	2A Dem Partey	\$ 3000.60
1/1/8	ID#	Wankon Standard 15/57 ST. Wankon, 97-52172		150.09
11/08	CK#	Decorah News 107 E. Water Paper Decorah SA 52101	Total ADS & Thouse HOS	1,005.12
11/08	CK#	McCaffreys 2149 Twen Spage RD Decorah JA 52101	Staff/Volunteer Comittee Party (Thank You)	800.00
12/8/08	ID# CK#	Allamaker Dema 658 Sogourn ofn Harpers Ferry 2052	Thone Ohgo	215.00
19/08/08	ID#	Donna Pas Dones 303 Upper Broduk Dental DA 5200	office Supplies	75,00
12/8/8	ID# /734 CK#	John Beard 2076 St. Hwy 9 Decorch SA 52401	Campaign Lunches	506.29
13/2/08	ID#	ADOM PHILLIPS 400 E. LOCUST ST NesMoiner DA 50309 212	Fundraiser Coats JA Dem. CHONSES	90,00
			SUB-TOTAL TOTAL (if last page of this schedule)	\$5,841.50 \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lows Gode 68A.402(3)(i).)

Page 9 of 9 | 1 of 1 | (for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM				SCHEDULE	
				. – .	IN-KIND ONTRIBUTIONS
150	ard for State,	House			HIS BOX IF
	v	;	The state of the s	AMENDIN	IG FORM
DATE		I RELATIONSHIP	DESCRIPTION	ESTIMATEO	√ IF FOR
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE (if applicable)	OF IN KIND CONTRIBUTION	FAIR MARKET VALUE	FUND-RAISER CONTRIBUTION
12/2/	DA Dem Party		See alol		
7/08	Jes man Fund		Arrachen	25,763.	
12/8	AFSCME		Arrached Arrached Arrached	51.40	
2					
			9UB-TOTAL	\$	
			TATA! /W!4	25,215.30	
			TOTAL (If last page of this	25,215.90	
			schedule)	۵۵, ۵, ۵, ۵, ۵	
committee. Re	requires candidates to disclose the relationship of letionship must be shown to the third degree of con	sanguinity (blood rela	tives) and affinity (relative		for Schedule E)
by marriage). familial relation	(See Page 2 of forms packet.) If surname of contri ship, enter "not applicable" in the relationship column	DUTOF IS THE SAME AS C In.	angidate, but there is no	1	of 1

Iowa Democratic Party/House Truman Fund

In kind contributions

For: John Beard

2076 State Hwy 9

Decorah, IA 52101

Purpose: Media buy

Date: October 29, 2008

Total Amount: \$22,034.25

Breakdown: \$21,768.50 - KWWL-TV

\$265.75 - Envision Communications

Purpose: Media buy

Date: October 30, 2008

Total Amount: \$2,935.50 - Envision Communications

Purpose: Production costs for TV commercial

Date: October 31, 2008

Total Amount: \$42.30

Purpose: Production costs for TV commercial

Date: November 1, 2008

Total Amount: \$142.76

Purpose: Invites and postage for PAC event

Date: December 16, 2008

Total: \$8.89

2009 JAN 15 PH 4: 03

2009 IAM IS DM 1.00

Prepared by: Mehgan Lec

House Truman Fund

5661 Fleur Dr.

Des Moines, IA 50321

mlee@iowademocrats.org

Paid for and produced in-house by the House Truman Fund.

7009 JAN 15 PM 4: 03

IN-KIND STATEMENT

To:

John Beard for Iowa House

2076 State Hwy 9 Decorah, IA 52101

1736 HD16

From:

AFSCME Iowa Council 61 PEOPLE FUND

Danny Homan

DATE

DESCRIPTION

VALUE/RATE

TOTAL. **DONATION**

11/4/2008

Phone Usage

October 31 to Nov 4, 2008

4 phones for 5 days @ \$2.58

51.60